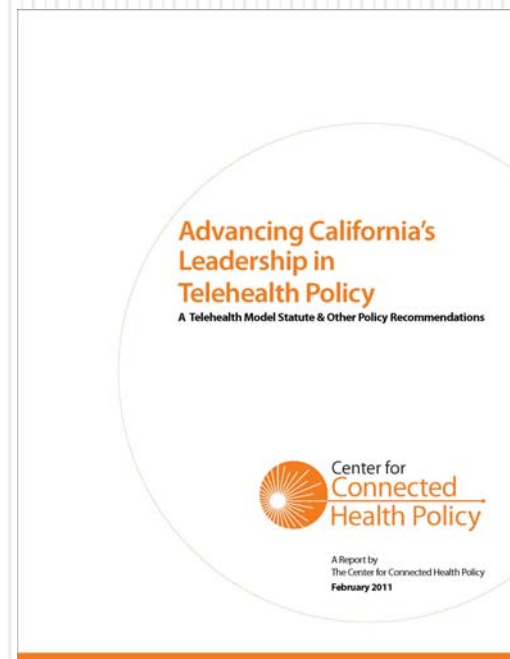


Center for Connected Health Policy Telehealth Model Statute

**California Health Workforce
Development Council**

April 20, 2011



CCHP MISSION

- CCHP works to identify and promote statutory, regulatory, policy and practice pattern changes that will maximize the ability of telehealth to improve health outcomes and care delivery.
- CCHP is a non-profit policy organization housed within the Public Health Institute

CCHP VISION

A health care system in which telehealth technologies are acknowledged as **essential tools** for improving health care access, quality, and efficiency.

Telemedicine Development Act of 1996

- Authored by then-CA State Senator Mike Thompson
- Groundbreaking in 1996 for its recognition that telemedicine was a legitimate means of providing services
- TDA has been used as a model for other states

Findings from research

- TDA lags behind technology and environment changes
- Reimbursement restrictions are a major barrier
- Some states have been more progressive in some of their telehealth-related policies
- Workforce development is a significant issue
- Practice/culture change is a significant barrier

Telemedicine Definition from TDA

Telemedicine means the practice of health care delivery, diagnosis, consultation, treatment, transfer of medical data, and education using interactive audio, video, or data communications. Neither a telephone conversation nor an electronic mail message between a health care practitioner and patient constitutes “telemedicine”.

California Business & Professions Code Section 2290.5

Formation of Model Statute Work Group

- 25 prominent experts
- Work Group policy goals:
 - To create **parity** of telehealth among health care delivery modes;
 - To actively **promote** telehealth as a tool to advance stakeholders' goals regarding health status and health system improvement;
 - To create **opportunities and flexibility** for telehealth to be used in new models of care and system improvements.

Proposed Definition for “Telehealth”

Telehealth is a mode of delivering health care services and public health that utilizes information and communication technologies to enable the diagnosis, consultation, treatment, education, care management and self-management of patients at a distance from health providers. Telehealth allows services to be accessed when providers and patients are in different physical locations, facilitates patient self-management and caregiver support for patients, and includes synchronous or asynchronous interactions.

Report Recommendations

- **13 Recommendations**

- 4 focusing on redefining “telemedicine” as “telehealth” and removing current barriers in California law
 - 3 incorporating telehealth into state work force law
 - 1 accelerating technology adoption
 - 1 consumer education
-
- 4 recommendations not for the Model Statute but important policy recommendations that could be achieved in a variety of ways

Report Recommendations

- **Redefining “telemedicine” as “telehealth” and removing current barriers in California law**
 - Update the term “telemedicine” to “telehealth”
 - Include the asynchronous application of technologies in the definition of telehealth and remove the sunset date for Medi-Cal reimbursement of teledermatology, teleophthalmology, teleoptometry services.
 - Remove restrictions in current telemedicine definition that prohibit telehealth-delivered services provided via email and telephone.
 - Specify that any service otherwise covered under standard contract terms must be covered whether provided in-person or via telehealth
 - Eliminate current Medi-Cal requirement to document a barrier to an in-person visit for coverage of services provided using telehealth

Report Recommendations

- **Redefining “telemedicine” as “telehealth” and removing current barriers in California law**
 - Require private health care payers and Medi-Cal to cover encounters between licensed health practitioners and enrollees irrespective of the setting of the enrollee and provider(s).
 - Remove requirement necessitating an additional informed consent waiver be obtained prior to any telehealth service being rendered

Report Recommendations

- **Workforce related proposals**
 - State Health Workforce Pilot Project (HWPP) to prioritize projects that utilize telehealth
 - Include telehealth in state Song-Brown training program on family practice/primary care
 - Include telehealth in loan repayment programs

Report Recommendations

- **Other proposals not in current law**
 - Require telehealth equipment and software vendors who seek to contract with the State of California to show that their products comply with current telehealth industry interoperability standards.
 - Require CalPERS to include telehealth services information in health benefits collateral materials for all beneficiaries.

Report Recommendations

- **Other Non-Statutory Policy Recommendations**
 - Require LAO to conduct a study identifying the most promising practices using telehealth-delivered care that could benefit Medi-Cal and other state-finance health programs.
 - Require state activities related to HIT/HIE to explicitly include telehealth advocate representation.
 - Require practitioners providing volunteer health services via telehealth to be included in any legislation that allows for malpractice coverage to volunteers providing health services.
 - Require malpractice insurance vendors and professional societies to educate practitioners regarding their options for malpractice coverage for telehealth services.

Center for Connected Health Policy

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